PTO/SB/22 (12-04) Approved for use through 7/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE e Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. Docket Number (Optional) ETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) **FY 2005** HHI-031USRCE (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) 09/890588-Conf. #6532 Filed November 21, 2001 **Application Number** FLUID FILTER WITH REMOVABLE CENTRAL COMPONENT WITH ADDITIONAL RETAINER For Art Unit 1723 Examiner M. O. Savage This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): <u>Fee</u> **Small Entity Fee** One month (37 CFR 1.17(a)(1)) \$120 \$60 \$ Two months (37 CFR 1.17(a)(2)) \$450 \$225 450.00 Three months (37 CFR 1.17(a)(3)) \$1020 \$510 \$ Four months (37 CFR 1.17(a)(4)) \$1590 \$795 Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 \$ Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0080 . I have enclosed a duplicate copy of this sheet. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number of acting under 37 CFR 1.34 December 14, 2004 Signature Date Sean D. Detweiler (617) 227-7400 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted. 12/17/2004 NNGUYEN1 00000063 120080 09890588 01 FC:1252 450.00 DA I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 41992889 US. in an envelope addressed to: MS Amendment, Commissioner for Patents P.Q. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 14, 2004

Signature:

(Sean D. Detweiler)

PTO/SB/17 (12-04) Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 09/890588-Conf. #6532 oursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** FEE TRANSMITTAL November 21, 2001 Filing Date Wilhelm ARDES First Named Inventor For FY 2005 **Examiner Name** M. O. Savage Applicant claims small entity status. See 37 CFR 1.27 1723 Art Unit HHI-031USRCE TOTAL AMOUNT OF PAYMENT 450.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check None Credit Card Money Order Other (please identify): x Deposit Account 12-0080 Lahive & Cockfield, LLP Deposit Account Number:____ Deposit Account Name:_ For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or any underpayment of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) 300 500 250 200 100 Utility 150 Design 200 100 100 50 130 65 200 Plant 100 300 150 160 80 300 500 250 600 300 Reissue 150 Provisional 200 100 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) **Fee Description** Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180 **Total Claims** Fee Paid (\$) **Multiple Dependent Claims Extra Claims** Fee (\$) Fee Paid (\$) Fee (\$) Fee Paid (\$) Extra Claims Fee (\$) Indep. Claims - 5 = 3. APPLICATION SIZE FEE

SUBMITTED BY	<u> </u>		<i>\</i>	1					
Signature	S					Registration No. (Attorney/Agent)	42,482	Telephone	(617) 227-7400
Name (Print/Type)	ean D. D	etwei	er					Date	December 14, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 41992889 US, in an envelope addressed to: MS Amendment, Commissioner for Petents, R.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

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